### FORM D

UNITED STATES SEC Mail Processing SECURITIES AND EXCHANGE COMMISSION Workington D.C. 20549 Section

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FEB 1 1 2008 FORM D

## NOTICE OF SALE OF SEQUENTIALS, DC PURSUANT TO REGULATION 1D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

| SEC U  | SEC USE ONLY |  |  |  |  |  |  |  |
|--------|--------------|--|--|--|--|--|--|--|
| Prefix | Serial       |  |  |  |  |  |  |  |
|        |              |  |  |  |  |  |  |  |
| DATE F | RECEIVED     |  |  |  |  |  |  |  |
| 1      | 1            |  |  |  |  |  |  |  |

| Name of Offering ( check if this is an amendment and name has changed, and indicate change.)   |  |
|--|--|
| FIRST AFFIRMATIVE FINANCIAL NETWORK, LLC REPURCHASE OF UNITS TENDER OF Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment   |  |
| A. BASIC IDENTIFICATION DATA   | THE PROPERTY OF THE PROPERTY O |
| L. Enter the information requested about the issuer  |  |
| Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) FIRST AFFIRMATIVE FINANCIAL NETWORK, LLC  | 08023101   |
| Address of Executive Offices (Number and Street, City, State, Zip Code)  | Telephone Number (Including Area Code)   |
| 5475 MARK DABLING BLVD., SUITE 108, COLORADO SPRINGS, CO 80918   | 719-636-1045   |
| Address of Pr neipal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)  | Telephone Number (Including Area Code)   |
| Brief Description of Business  |  |
| PROVIDES SOCIALLY RESPONSIBLE FINANCIAL ADVICE   |  |
| bus ness trust   limited partnership, to be formed   LIMITED LIVING  | THOMSON  |
| GENERAL INSTRUCTIONS   | FINANCIAL  |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D (77d(6)).  | or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.   |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is $duc$ , on the date it was mailed by United States registered or certified mail to that address. |  |
| Where To File U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20   | 9549.  |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.   | ly signed. Any copies not manually signed must be  |
| Information Required: A new filing must contain all information requested. Amendments need only reporthereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC.   |  |
| Filing Fee: There is no federal filing fee.  |  |
| State: This notice shill be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Sare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for            | Securities Administrator in each state where sales   |

accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; E ich beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Eich executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and E ich general and managing partner of partnership issuers. General and/or Check Box(:s) that Apply: Promoter Managing Partner Full Name ( ast name first, if individual) GEORGE R. GAY Business or Residence Address (Number and Street, City, State, Zip Code) 5475 MAFK DABLING BLVD., SUITE 108, COLORADO SPRINGS, CO 80918 General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) STEVEN .. SCHUETH Business or Residence Address (Number and Street, City, State, Zip Code) 5475 MARK DABLING BLVD., SUITE 108, COLORADO SPRINGS, CO 80918 Beneficial Owner Executive Officer Director General and/or Check Box(cs) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (I ast name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(e3) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Eesidence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Business or Lesidence Address (Number and Street, City, State, Zip Code)

|          |   |             |                |             | В. І        | NFORMAT        | ION ABOU    | T OFFERI    | NG                                      |          |   |             |                |
|----------|---|-------------|----------------|-------------|-------------|----------------|-------------|-------------|---|----------|---|-------------|----------------|
| 1.       | Has the   | issuer sol  | d, or does ti  | he issuer i | ntend to se | ell to non-a   | ccredited i | nvestors ir | this offer                              | ine?     |   | Yes         | No<br><b>⊠</b> |
| •        | 1105 1110   | 155447 (507 | u, or uoes :   |             |             | n Appendix     |             |             |   | -        | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | نط          |                |
| 2.       | What is   | the minim   | num investn    |             |             | • •            |             | _           |   |          |   | \$_2,000.00 |                |
|          | Б.,   | or '        |                |             |             | 1 20           |             |             |   |          |   | Yes         | No             |
| 3.<br>4. |   |             | permit join    |             |             |                |             |             |   |          |   | K           |                |
|          | commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. |             |                |             |             |                |             |             |   |          |   |             |                |
| Full     | Name (1   | Last name   | first, if ind  | ividual)    |             |                |             | ,           |   |          |   |             |                |
| Bus      | iness o   | Residence   | Address (N     | lumber and  | d Street, C | ity, State, 2  | Cip Code)   |             |   | ••       |   |             |                |
| Nan      | ne of Ass   | sociated B  | roker or De    | aler        |             |                |             |             |   |          |   |             |                |
| State    | es in Wh  | ich Persor  | Listed Has     | s Solicited | or Intends  | to Solicit     | Purchasers  |             |   |          | <del> </del>                            |             | <del></del>    |
|          | (Checi:   | "All State: | s" or check    | individual  | States)     | •••••••••      |             |             | ****************                        |          | •••••                                   | ☐ Al        | l States       |
|          | AL  | AK          | AZ             | AR          | CA          | CO             | CT          | DE          | DC                                      | FL       | GA                                      | HI          | ID             |
|          | IL<br>MT  | NE          | IA<br>NV       | KS<br>NH    | KY<br>NJ    | LA<br>NM       | ME<br>NY    | MD<br>NC    | MA<br>ND                                | MI<br>OH | MN<br>OK                                | MS<br>OR    | MO<br>[PA]     |
|          | RI  | SC          | SD             | TN          | TX          | UT             | VT          | VA          | WA                                      | WV       | WI                                      | WY          | PR             |
| Full     | Name (I   | Last name   | first, if indi | ividual)    |             |                |             |             |   | <b></b>  |   |             |                |
| Busi     | iness cr  | Residence   | Address (1     | Number an   | d Street, C | City, State,   | Zip Code)   |             |   |          |   |             | <del></del>    |
| Nam      | ne of Ass   | ociated Bi  | oker or De     | aler        |             |                |             |             |   |          |   |             |                |
| State    | es in Wh  | ich Persor  | Listed Has     | Solicited   | or Intends  | to Solicit     | Purchasers  |             |   |          |   |             |                |
|          | (Checl  | "All States | or check       | individual  | States)     |                | ,           |             |   |          | •••••                                   | ☐ Al        | l States       |
|          | AL  | AK          | AZ             | AR          | CA          | CO             | (CT)        | DE          | DC                                      | FL       | GA                                      | HI          | ID             |
|          | īL  | IN          | IA             | KS          | KY          | LA             | ME          | MD          | MA                                      | MI       | MN                                      | MS          | MO             |
|          | MT<br>RI  | NE<br>SC    | NV<br>SD       | NH<br>TN    | NJ<br>TX    | NM<br>UT       | NY<br>VT    | NC<br>VA    | ND<br>WA                                | OH)      | OK<br>WI                                | OR WY       | PA PR          |
| Full     |   |             | first, if indi |             |             |                | <u> </u>    | <u>(VA)</u> |   | <u> </u> | [W1]                                    | W 11        |                |
|          | <del></del> -   |             |                | <u> </u>    |             |                |             |             |   |          |   |             |                |
| Busi     | ness o.   | Residence   | Address (N     | Number an   | d Street, C | City, State, 1 | Zip Code)   |             |   |          |   |             |                |
| Nam      | e of Ass  | ociated Br  | oker or Dea    | aler        |             |                |             |             |   |          |   |             |                |
| State    | es in Wi  | ich Person  | Listed Has     | Solicited   | or Intends  | to Solicit     | Purchasers  |             |   |          |   |             |                |
|          | (Check  | "All States | or check       | individual  | States)     |                |             |             | *************************************** |          |   | ☐ Al        | l States       |
|          | ΛL  | AK          | AZ             | AR          | CA          | CO             | CT          | DE          | DC                                      | FL       | GΛ                                      | HI          | ID             |
|          | MT)   | IN<br>NE    | IA<br>NV       | KS<br>NH    | KY<br>NJ    | LA<br>NM       | ME<br>NY    | MD<br>NC    | MA<br>ND                                | MI<br>OH | MN<br>OK                                | MS<br>OR    | MO<br>PA       |
|          | RI  | SC          | SD             | TN          | TX          | UT             | VT          | VA          | WA                                      | WV       | WI)                                     | WY          | PR             |

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and   |                        |               |   |       |
|----|--|------------------------|---------------|---|-------|
|    | already exchanged.   | Aggregate              |               | Amount Already  |       |
|    | Type of Security   | Offering Price         | ĺ             | xxxtenc   | dered |
|    | □ ebt  | 300,000.00             | \$            | 229,000.00  |       |
|    | Equity   |                        | S             |   |       |
|    | ☐ Common ☐ Preferred   |                        |               |   |       |
|    | Convertible Securities (including warrants)  | \$                     | \$            |   |       |
|    | Partnership Interests  |                        |               |   |       |
|    | C ther (Specify)   |                        |               |   |       |
|    | Total  | 300,000.00             | s             | 229,000.00  |       |
| •  | Answer also in Appendix, Column 3, if filing under ULOE.   |                        | _             |   | •     |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."             | Number<br>Investors    |               | Aggregate<br>Dollar Amount<br>of ************************************ |       |
|    | Accredited Investors   | 7                      |               | 229,000.00  |       |
|    | Non-accredited Investors   |                        | . \$          | 3   |       |
|    | Total (for filings under Rule 504 only)  |                        | - 5           | S   |       |
|    | Answer also in Appendix, Column 4, if filing under ULOE.   |                        |               |   |       |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.   |                        |               |   |       |
|    |  | Type of                |               | Dollar Amount   | dorod |
|    | Type of Offering   | Security Membership II | nite .        |   | rerea |
|    | Rule 505   | Welliocianip o         | illo (        | 229,000.00  |       |
|    | Regulation A   |                        |               | 5   |       |
|    | Rule 504   |                        |               | <u> </u>  |       |
|    | Total  |                        | 5             | 229,000.00  |       |
| 4  | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. |                        |               |   |       |
|    | Transfer Agent's Fees  |                        | <b>] \$</b> . |   |       |
|    | Printing and Engraving Costs   |                        | ] \$          |   |       |
|    | Legal Fees   |                        | J '           | 15,000.00   |       |
|    | Accounting Fees  | <u>J</u>               | <b>7</b> ] \$ | 2,500.00  |       |
|    | Engineering Fees   |                        | ] <b>\$</b>   |   |       |
|    | Sales Commissions (specify finders' fees separately)   |                        | <b>S</b>      |   |       |
|    | Cther Expenses (identify)  |                        | ] <b>\$</b>   |   |       |
|    | Total  |                        | -<br>7        | 17,500.00   |       |

|     | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSE   | ES AND USE OF PROCEEDS                                 |   |
|-----|---|--|---|
|     | b. Enter the difference between the aggregate offering price given in response to Part and to al expenses furnished in response to Part C — Question 4.a. This difference is the proceeds to the issuer."   | he "adjusted gross                                     | \$  |
| 5.  | Indicate below the amount of the adjusted gross proceed to the issuer used or propose each of the purposes shown. If the amount for any purpose is not known, furnish check the box to the left of the estimate. The total of the payments listed must equal the proceeds to the issuer set forth in response to Part C — Question 4.b above. | an estimate and  |   |
|     |   | Payments to<br>Officers,<br>Directors, &<br>Affiliates | Payments to<br>Others                             |
|     | Salaries and fees   | <u>\$</u> 0.00   | 0.00  |
|     | Purchase of real estate   | <u>\$_0.00</u>   | \$ 0.00   |
|     | Purchase, rental or leasing and installation of machinery and equipment   | \$ 0.00  |   |
|     | Construction or leasing of plant buildings and facilities   | \$ 0.00  | s 0.00  |
|     | Acquisition of other businesses (including the value of securities involved in this offerir g that may be used in exchange for the assets or securities of another issuer pursuant to a merger)   |  | □\$ 0.00  |
|     | Repay nent of indebtedness  |  | \$ 0.00   |
|     | Working conital   | _  | \$ 0.00   |
|     | Other (specify): TENDER OFFER - PAYMENT TO EXISTING MEMBERS   | □ \$ 0.00  | \$ 282,500.00                                     |
|     |   | s 0.00   | ss  |
|     | Column Totals   |  | \$_282,500.00                                     |
|     | Total Fayments Listed (column totals added)   | <u>s_2</u>   | 82,500.00   |
|     | D. FEDERAL SIGNATURE  | <u> </u>   |   |
| sig | e issuer has duly caused this notice to be signed by the undersigned duly authorized per<br>enature constitutes an undertaking by the issuer to furnish to the U.S. Securities and P<br>e information furnished by the issuer to any non-accredited investor persuant to page   | xohange Commission, upon writte                        | ale 505, the following<br>en request of its staff |
| lss | suer (Print or Type) Signaturo  | Date   |   |
| FI  | RST AFFIRMATIVE FINANCIAL NETWORK, LLC  | 1.28-  | 08  |
| Na  | ime of Signer (Print or Type) Title of Signer (Print or Type)   |  |   |
| GE  | ORGE F. GAY MANAGING MEMBER   |  |   |

- ATTENTION -

Ir tentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

|          | E. STATE SIGNATURE  |  |  |  |  |  |  |  |  |
|----------|---|--|--|--|--|--|--|--|--|
| 1,       | Is any party described in 17 CFR 230.262 presently subject to any of the disqualification  Yes No provisions of such rule?  |  |  |  |  |  |  |  |  |
|          | See Appendix, Column 5, for state response.   |  |  |  |  |  |  |  |  |
| 2.       | The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form C (17 CFR 239.500) at such times as required by state law.   |  |  |  |  |  |  |  |  |
| 3.       | The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.   |  |  |  |  |  |  |  |  |
| 4.       | The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform li nited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability o'this exemption has the burden of establishing that these conditions have been satisfied. |  |  |  |  |  |  |  |  |
|          | ter has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned tho fized person.  |  |  |  |  |  |  |  |  |
| lssuer ( | Print or Type) Date   |  |  |  |  |  |  |  |  |
| FIRST A  | AFF IRMATIVE FINANCIAL NETWORK, LLC $A = 1000$  |  |  |  |  |  |  |  |  |
| Name (I  | Print or Type) Title (Print or Type)  |  |  |  |  |  |  |  |  |
| GEOR     | GE R. GAY MANAGING MEMBER   |  |  |  |  |  |  |  |  |

#### Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

|       |                                |  | ,  | Al                                   | PPENDIX      |  |        | -  |          |
|-------|--------------------------------|--|--|--------------------------------------|--------------|--|--------|--|----------|
| 1     | Intend<br>to non-a<br>investor | I to sell<br>ccredited<br>s in State<br>-Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) |                                      | amount pui   | investor and rchased in State C-Item 2)  |        | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) |          |
| State | Yes                            | No   |  | Number of<br>Accredited<br>Investors | Amount       | Number of<br>Non-Accredited<br>Investors | Amount | Yes  | No       |
| AL    |                                |  |  |                                      |              |  |        |  |          |
| AK    |                                |  | •  |                                      |              |  |        |  |          |
| ΑZ    |                                | ×  |  | 1                                    | \$50,000.00  |  |        |  | <u>x</u> |
| AR    |                                |  |  |                                      |              |  |        |  |          |
| CA    |                                |  |  |                                      |              |  |        |  |          |
| со    |                                | X  |  | 3                                    | \$115,000.00 |  |        |  | ×        |
| СТ    |                                |  |  |                                      |              |  |        |  |          |
| DE    |                                |  |  |                                      |              |  |        |  |          |
| DC    |                                |  |  |                                      |              |  |        |  |          |
| FL    |                                |  |  |                                      |              |  |        |  |          |
| GA    |                                | ,  |  |                                      |              |  |        |  |          |
| ні    |                                |  |  |                                      |              |  |        |  |          |
| ID    |                                |  |  |                                      |              |  |        | <u> </u>   |          |
| IL    |                                |  |  |                                      |              |  |        |  |          |
| IN    |                                |  |  |                                      |              |  |        |  | Ī        |
| ΙA    |                                | ×  |  | 1                                    | \$8,000.00   |  |        | Ī  | ×        |
| KS    |                                |  |  |                                      |              |  |        |  |          |
| KY    |                                |  |  |                                      |              |  |        |  |          |
| LA    |                                |  |  |                                      |              |  |        |  |          |
| МЕ    |                                |  |  |                                      |              |  |        |  |          |
| MD    |                                |  | ·  |                                      |              |  |        |  |          |
| МА    |                                |  |  |                                      |              |  |        |  |          |
| МІ    |                                | ×  |  | 1                                    | \$6,000.00   |  |        | [  | ×        |
| MN    |                                |  | <u></u>  |                                      |              |  |        |  |          |
| MS    | <del></del>                    | ,  |  |                                      |              |  |        |  |          |

|       | APPENDIX                      |  |  |                                      |             |  |  |                                  |  |  |  |
|-------|-------------------------------|--|--|--------------------------------------|-------------|--|--|----------------------------------|--|--|--|
| 1     | Intend<br>o non-a<br>investor | 2 If to sell accredited in State (-Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | *                                    | amount pu   | 4<br>investor and<br>rchased in State<br>C-Item 2) |  | under Sta<br>(if yes,<br>explana | ition of<br>granted)                         |  |  |
| State | Yes                           | No   |  | Number of<br>Accredited<br>Investors | Yes         | No   |  |                                  |  |  |  |
| МО    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| мт    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| NE    |                               |  |  |                                      | :           |  |  |                                  |  |  |  |
| NV    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| NH    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| NJ    | <u> </u>                      |  |  |                                      |             |  |  |                                  |  |  |  |
| NM    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| NY    |                               | <b>x</b>                                   |  | 1                                    | \$50,000.00 |  |  |                                  | ×  |  |  |
| NC    |                               |  |  |                                      |             |  |  |                                  | 1  |  |  |
| ND    |                               |  |  |                                      | :           |  |  |                                  |  |  |  |
| ОН    |                               |  |  |                                      |             |  |  |                                  | <u>                                     </u> |  |  |
| ок    | ,                             |  |  |                                      |             |  |  |                                  |  |  |  |
| OR    |                               |  |  |                                      |             |  |  | ,                                |  |  |  |
| PA    | <u> </u>                      |  |  |                                      |             |  |  |                                  |  |  |  |
| RI    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| SC    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| SD    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| TN    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| ТХ    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| UT    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| VT    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| VA    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| WA    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| wv    |                               |  |  |                                      |             |  |  |                                  |  |  |  |
| WI    |                               |  |  |                                      |             |  |  |                                  |  |  |  |

|       |         |   |  | APP                                  | ENDIX  | · · · · · · · · · · · · · · · · · · ·    |        |     |    |
|-------|---------|---|--|--------------------------------------|--|--|--------|-----|----|
| 1     |         | 2   | 3  |                                      |  | 5 Disqualification                       |        |     |    |
|       | o non-a | d to sell<br>accredited<br>rs in State<br>3-Item 1) | Type of security<br>and aggregate<br>offering price<br>offered in state<br>(Part C-Item 1) |                                      | Type of investor and amount purchased in State (Part C-Item 2) |  |        |     |    |
| State | Yes     | No  |  | Number of<br>Accredited<br>Investors | Amount   | Number of<br>Non-Accredited<br>Investors | Amount | Yes | No |
| WY    |         |   |  |                                      |  |  |        |     |    |
| PR    |         |   |  |                                      |  |  |        |     |    |

